

5 REASONS TO GET THE GULF FLEET CARD

- **Enhanced security** with purchase alerts and driver ID requirements
- Easy, online controls to help reduce unauthorized spending and monitor driver purchases
- No more sorting through stacks of receipts or reimbursing drivers - we do the paperwork for you
- Best-in-class, award-winning customer service 24/7
- Access to over 2,500 Gulf locations and over 90% of all U.S. fueling locations with the Gulf Universal Fleet Card

Ray Wormwood Sales ray.wormwood@wexinc.com Call 888 737 7629 x7460

Opportunity # SALESFORCE

FOR OFFICE ONLY:

Sales Code	Plastic	Coupon Code	Acct. #
	GUL2		0496
	GUL1		4100
10914563	GUL3	GU1	4160

GULF FLEET APPLICATION Select a Card Program: ☐ Gulf Business Card: No Fees ☐ Gulf Commercial Card: \$1 per card, per month. Gulf Universal Card: \$40 one-time setup fee, \$2 per card, per month Tell us about your business Legal Name of Business **Business Physical Address** City State Zip Tax Payer Identification # Company Phone # Company Fax # Legal Structure(Corp, Partnership, LLC, Proprietorship, Gov, PC or PA) # of vehicles \$ Years in Business Average Monthly Fuel Exp. **Billing Contact Information** Billing Contact First Name Billing Contact Last Name Billing Contact Phone # Billing Address City State **Authorization**

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By signing below, I represent and warrant that I am authorized to bind the Company to the terms & conditions of this offer and the Business Card Agreement, which is available upon request. I further acknowledge that I have read and agree to the Summary of Key Terms enclosed.

authorized Officer Signature		Date		
rint Name		Email Address		
Title of Appli	cant:			
President	☐ Vice President	Treasurer	Owner	Partner
Tell us about lequired if this acc mited liability con	count is for a business inco	rporated less than or	ie year, a propriei	torship, a professional corporation, or a
irst Name	Li	ast Name		
Residential Addre	ess			
City	S	tate	Zip	

I understand and acknowledge that by signing below, both the Company and I will be jointly and severally liable for all amounts owing on this account.

Date of Birth

Email Address

Signature

Social Security #

Home Phone #

Date

Card Issuer is WEX Bank, member FDIC.

SUMMARY OF KEY TERMS

Credit Disclosure: By submitting this application, Company requests a business charge account and if approved for credit, one or more business charge cards for use by Company and its employees. The Card Issuer is WEX BANK. Company agrees to the terms and conditions set forth in the Business Charge Account Agreement provided with this application and/or provided with the card(s). Use of any card issued pursuant to this application confirms Company agreement to said terms and conditions. In the event that this application is denied based upon information contained in a consumer credit report used to evaluate credit, Issuer is authorized to report the reason for the denial to the Company. Direct inquiries of businesses where the undersigned maintains accounts may also be made. If requested, Company agrees to provide company financial statements, including at minimum, a Balance Sheet and Income Statement for the last two years upon request. Joint and Several Liability: If required, and if Bank issues card(s) to Company, both the Company and I am jointly and severally liable with the Company for all charges to the account established pursuant to this application. This is a guaranty of payment and not merely of collection. You agree to pay upon demand any amount owed by Company due under the Business Charge Account Agreement.

I understand that I am applying for commercial credit on behalf of the business. I authorize Issuer to obtain credit bureau reports, both personal (if required) and in the name of the Company, that may be used when considering this application for credit and any other information about me in connection with: 1) extensions of credit on this account; 2) the administration, review or collection of this account. I agree that I may be may contacted at any of the numbers that I have provided. In the event that the account is not paid as agreed, Issuer may report my liability (both personally and for the Company) to credit bureaus or others that may lawfully receive such information.

Federal Compliance: Issuer complies with Federal Law which requires all financial institutions to obtain, verify and record information that identifies each company or person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents for your business.